PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY			OTHER THAN		
TOTAL CLAIMS			2.5		(Column 2)		1	TYPE		OR T	SMALL		
FOR			NUMBER FILED		MUSAC	ED SVTOA		BASIC FEE	FEE	-	RATE	FEE	
			1/h		NUMBER EXTRA			BASIC FEE	375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			farminus 20=		24			X\$ 9≖		OR	X\$18=	CV86	
INDEPENDENT CLAIMS						Z		X42=		OR	X84=		
* If the difference in column 1 is less					·····			+140=		OR	+280=	280	
"	me omerence	e in column 1 is	iess than z	ero, enter	"0" in c	column 2		TOTAL		OR	TOTAL	151B	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 2) (Column 3)						(Column 3)		SMALL	ENTITY	OR	OTHER SMALL		
AMENDMENTA		REMAINING AFTER AMENDMENT		PREVIO	BEA	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	* 45	Minus	** 4	1	=		X\$ 9=		OR	X\$18≈		
	Independent	* U	Minus	***	5	=		X42=		OR	X84=		
<u> </u>	11101111200	2117411011 01 1810	DETIFICE DE	PENDENT	CLAIM			+140=		OR	+280=		
	**						Α	TOTAL DDIT, FEE		OR	TOTAL ADDIT. FEE		
_		(Column 1)		Colun		(Column 3)		•				**	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	•	Minus	***		=		X42=		00	X84≃		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						▎┠			OR			
							L	+140=		OR	+280=		
	* * # · · · · · · · · · · · · · · · · ·		- 4				A	TOTAL ODIT. FEE		OR	TOTAL ADDIT, FEE		
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST										_			
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	IER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	#r#r		=		X\$ 9=		OR	X\$18=		
ME	Independent.	*	Minus	AND		9	-	X42≃		1	X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	∧04=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+280=			
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "2." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR ,	TOTAL ADDIT. FEE		
	the "Highest Nun	mber Previously Paid ober Previously Paid	For" (Total o	SPACE is Independe	iess that nt) is the	n 3, enter "3." highest numbe	r toun	d in the app	ropriate box				